

1 2 2002 LExpress Mail Label No. EL862353852US

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COMBINED DECLARA (Includes Reference to PC	R OF ATTORNEY		File No.	00-96			
As a below named inventor, I hereby declare that:							
My residence, post office a inventor (if only one name matter which is claimed an	address and citizen is listed below) or	ship are as stated bel an original, first and	l jöint inventor (if plural	pelieve that I are names are liste	n the original, ed below) of th	first and sole ne subject	
ADIPOCYTE COMPLEM	MENT RELATED	PROTEIN ZACRPI	3				
the specification of which	(check only one ite	em below):					
is attached hereto	was filed as U	Inited States applicat	ion Serial No. on Nov	rember 29, 200	I	:	
and was amended on							
was filed as PCT international application Number on							
I hereby state that I have reamended by any amendme of this application in according 35, United States Cocapplication(s) designating any foreign application(s) country other than the United States I have reamended by any foreign application (s) to country other than the United States I have reamended by any amendment of the state of the stat	nt referred to abov dance with Title 3' de, 119 of any fore at least one country for patent or invent	e. I acknowledge the 7, Code of Federal R ign application(s) for y other than the Unite tor's certificate(s) or	e duty to disclose inform egulations, 1.56. I here patent or inventor's cer ed States of America list any PCT international a	ation which is by claim foreig tificate(s) or of ed below and h pplication(s) de	material to the n priority bene any PCT inte- nave also ident esignating at le	examination efits under rnational ified below east one	
application(s) of which price	ority is claimed:		-	_		,	
PRIOR FOREIGN/PCT		) AND ANY PRIOR	RITY CLAIMS UNDER	35 U.S.C. 119	:		
COUNTRY		ATION NUMBER	DATE OF FILING		RIORITY CL	AIMED	
	- And Die	THOMPONIDEN	DATE OF FIELD		YES	NO	
		•					
					YES	∐ NO	
	<u> </u>				YES	□NO	
I hereby claim the benefit t	ınder Title 35 Unit	ed States Code 119(e	e) of any United States p	rovisional appl	lication(s) liste	ed below.	
U.S. APPLICATION NUMBER			U.S. FILING DATE				
60/253,924			November 29, 20	November 29, 2000			
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I hereby claim the benefi application(s) designating claims of this application is United States Code, 112, Regulations, 1.56 which of of this application:	the Urited States s not disclosed in t I acknowledge the courred between the	of America that is/a hat/those prior appliched uty to disclose, e filing date of the prior of th	are listed below and, in cation(s) in the manner material information a rior application(s) and the	sofar as the su provided by the as defined in the national or P	bject matter of first paragrap Title 37, Cod CT internation	of each of the oh of Title 35, le of Federal nal filing date	
PRIOR U.S, APPLICATION	ONS OR PCT INT	ERNATIONAL APP	LICATIONS DESIGNA	ATING THE U	.S. FOR BEN	EFIT	
U.S. APPLICATIONS			STATUS (check one)				
			ING DATE		Pending	Abandoned	
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n.cm ·	DDI IOITIONS S	ESIGNATING THE U		ļ			
APPLICATION	FILING DA		U.S. SERIAL NUMBERS				
		ASSIGN	NED (if any)				
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	I						



POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. Robyn Adams Jennifer K. Johnson Phillip B.C. Jones Suzanne M. Shema Reg. No. 44,495 Reg. No. 38,195 Reg. No. 43,696 Reg. No. 32,284 Paul G. Lunn Gary E. Parker Deborah A. Sawislak Reg. No. 37,438 Reg. No. 32,743 Reg. No. 31,648 **Send Correspondence To:** Jennifer K. Johnson, J.D. **Direct Telephone Calls To:** Jennifer K. Johnson, J.D. ZymoGenetics, Inc. (206) 442-6676 1201 Eastlake Avenue East Seattle, WA 98102 Full Name Family Name First Given Name Second Given Name Fox Brian Residence City State or Foreign Country Country of Citizenship Seattle WA US Post Office Post Office Address City State & Zip Code/Country 3925 Woodlawn Ave N. WA 98103/US Seattle Address First Given Name Second Given Name Full Name Family Name Holloway James Residence State or Foreign Country Country of Citizenship City Seattle WA State & Zip Code/Country Post Office Post Office Address City Address 835 NE 89th St. WA 98115/US Seattle Full Name Family Name First Given Name Second Given Name Residence City State or Foreign Country Country of Citizenship Post Office Post Office Address State & Zip Code/Country Address Full Name Family Name First Given Name Second Given Name Residence City State or Foreign Country Country of Citizenship Post Office Post Office Address State & Zip Code/Country Address Full Name Family Name First Given Name Second Given Name Residence State or Foreign Country Country of Citizenship Post Office Post Office Address State & Zip Code/Country City Address Full Name Family Name First Given Name Second Given Name Residence City State or Foreign Country Country of Citizenship Post Office Post Office Address State & Zip Code/Country I hereby declare that all statement made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application any patent issuing Signature of Inventor 2 Signature of Inventor 3 Signature of Inventor 1 Date Date Signature of Inventor 4 Signature of Inventor 5 Signature of Inventor 6

Date

Date

Date